Effective OCLODOC1, 2003									091	/2/	960	109
CLAIMS AS FILED - PART I							SN	IALL E	NTITY			R THAN
TOTAL CLAIMS			(Column 1) (Column 2)				PE [		OR		ENTITY	
FOR								RATE	FEE	]	RATE	FEE
-			NUMBE	NUMBER FILED		NUMBER EXTRA		ASIC FE	₽ <i>38</i> 5	OR	BASIC FEE	3770
TOTAL CHARGEABLE CLAIMS			m	minus 20=		*		X\$ <del>4</del> =		OR	X\$ <b> </b> 8=	
	DEPENDENT	minus 3 =		<u> </u>	*		X43=		OR	X8b=		
Ľ	ULTIPLE DEPE	PREȘENT	RESENT				145=		1	+290=	<b></b> -	
*	If the difference	e in column 1 i	s less than :	less than zero, enter "0" in column 2			L.	OTAL	1.	OR	TOTAL	
CLAIMS AS AMENDED - PART II						•	OIAL	<u> </u>	JOR	•	THAN	
لے		(Column 1)		(Column 2) (Column 3)				OTHER THAT SMALL ENTITY OR SMALL ENTIT				
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	12/	Minus	" d	7	= /	<b>&gt;</b>	(\$ <b>9</b> =		OR	X\$(8=	,
AME	Independent	TATION OF A	Minus	***	<u>3</u>	=	)	K13=	1	OR	×26=	
	Trinoi Frico	ENTATION OF M	IOLITPLE DE	PENDENT	CLAIM			45 =		OR	-0PG-	/
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS	Programme and	(Colum		(Column 3)	!	•	• .			
MENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
QN	Total	*	Minus	**		=	×	19-		OR	x\$/8=	
AME	Independent	*	Minus	***		=	Х	43=		OR	×86±	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		• -	•					US= TOTAL		OR	+390= TOTAL	<del></del> ,
٠.		<i>'</i> 2.			•			T. FEE	-; .	OR A	ODIT: FEE	· · · · · · · · · · · · · · · · · · ·
		(Column 1) CLAIMS		(Colum HIGHE		(Column 3)	<b></b>	<del></del>		_		·
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	JSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q I	Total	*	Minus	**		=	X	9=	<b></b>	OR	X\${8=	
Ž	Independent	*	Minus	***		=	×	13=		OR	×86	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									<sup>on</sup>		<u></u>
* #	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							15=		OR	+370=	
***	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number for										TOTAL DDIT. FEE	
T	he *Highest Num	ber Previously Paid	f For" (Total or	Independen	t) is the	highest number	lound in	the app	ropriale box	in colu	mn 1.	
ЯM	PTO-875 (Rev. 12	702)										

Application or Docket Number